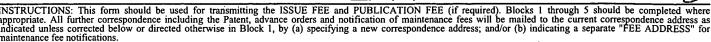
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be con appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current corresponder indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE A maintenance fee notifications.								should be completed where correspondence address as arate "FEE ADDRESS" for
		ICE ADDRESS (Note: Use Block 1 for	Fee(s) Transmittal. T papers. Each addition	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must				
	000513 7590 09/12/2005  WENDEROTH, LIND & PONACK, L.L.P. 2033 K STREET N. W. SUITE 800  WASHINGTON, DC 20006-1021				have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
10/	27/2005 MBEYENE2 0000				(Depositor's name)			
	C:1504 300.00 OP C:2501 700.00 OP				(Signature) (Date)			
	APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. COM		CONFIRMATION NO.
	10/699,818	10/699,818 11/04/2003			Hideki Ogino		1602A	4458
	TITLE OF INVENTION: (	CENTRIFUGAL EXTRACT	OR OF NON-CON	TACT JOUI	RNALED CONSTRUCTION			
	APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE
!	nonprovisional	YES	\$700		\$300	\$1	000	12/12/2005
	EXAMINER		ART UN	IT	CLASS-SUBCLASS	J		
~	COOLEY, CHARLES E		1723		494-084000			-
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the na or agents (2) the na registered 2 registered	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Wenderoth, Lind & Ponack, L.L.P.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed frecordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  THE COMMISSIONER IS AUTHORIZE								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY CHARGE ANY DEFICIT								APER TO DEPOSIT
JAPAN NUCLEAR CYCLE DEVELOPMENT INSTITUTE IBARAKI-KEN, JAPANCOUNT NO. 23-0975								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🌋 Corporation or other private group entity 🚨 Government								
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):								
☐ A check in the amount of the fee(s) is enclosed. Check No. ☐ A check in the amount of the fee(s) is enclosed. Check No. ☐ Payment by credit card. Form PTO-2038 is attached.								) 10 100
				ment by credit card. Form PTO-2038 is attached.  Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Account Number (enclose an extra copy of this form).				
	Advance Order - # of Copies Deposit Ac				count Number	enarge the requ	olose an extra c	credit any overpayment, to opy of this form).
	5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							FR 1.27(g)(2).
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United Attates Patent and Trademark Office.								ation identified above. he assignee or other party in
		W/W /4/3x			0	ctober 2	5, 2005	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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44,142